

EXHIBIT C

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MASSACHUSETTS

SCOTT RODGERS
Plaintiff

V.

CORRECTION OFFICER ORCHID,
UNKNOWN CORRECTION OFFICER
JOHN DOE, JOE WHITMORE, DR.
HOWARD, JOHN SMITH, PLYMOUTH
COUNTY
Defendants

CIVIL ACTION NO.: 04-11842-PBS

AFFIDAVIT OF THE DEFENDANT, JOHN B. HOWARD, M.D.

Now comes John B. Howard, M.D., and under oath states the following to be true, accurate and based upon his own personal knowledge:

1. My name is John B. Howard, M.D. I am a medical doctor currently licensed to practice in the Commonwealth of Massachusetts, and I was licensed to practice in Massachusetts as of August 2001.
2. In or around August 2001, I treated inmates at the Plymouth County Correctional Facility ("PCCF").
3. I am familiar with the records of Scott Rodgers' medical treatment while he was incarcerated at PCCF during the month of August 2001.
4. The PCCF medical records show that on August 7, 2001, I examined Scott Rodgers and prescribed Naprosyn, 500 milligrams twice per day, to be given for thirty days to treat Mr. Rodger's complaints of knee pain. (See PCCF Medical Records, Physician's Order dated 08/07/01, attached as Exhibit 1).
5. I do not recall Mr. Rodgers making any complaints that he was experiencing gastrointestinal pain on August 7, 2001, nor do the medical records reflect that any such complaints were made.
6. I was first notified of Mr. Rodgers' gastrointestinal complaints on August 26, 2001, when I was informed of his condition and gave telephone orders concerning his transfer to Jordan Hospital.

7. The medication distribution policy at PCCF does not require that Naprosyn be crushed prior to being given to an inmate, and I did not order or request Naprosyn to be crushed before being given to Mr. Rodgers.

8. I am not aware that the Naprosyn prescribed to Scott Rodgers was crushed before being given to him.

SIGNED UNDER THE PAINS AND PENALTIES OF PERJURY THIS 11

DAY OF SEPTEMBER, 2006.


John B. Howard, M.D.

PLYMOUTH COUNTY CORRECTIONAL FACILITY

PHYSICIAN'S ORDERS

Authorization is given to the Pharmacy to dispense a generic and therapeutic equivalent drug when a brand name is ordered unless checked here ☐

Allergies: NKA

Patient's Name: Rodgers, Scott
 ID #: 30689 DOB: 6/15/55
 Unit: _____ Room: _____

Time	Date	M.O.	Physician's Orders & Medications
	8/7/01		<p>Celebra 20mg po qd ✓ x 30 days</p> <p>old records requested Health Center, Dorchester and Dorchester House</p> <p>Butter Butte x 90 days ✓</p> <p>Naprosyn 500mg po BID x 30 days</p> <p>old records mt H.</p> <p>noted Poyette 8/8/01 through</p>
	8/21/01		<p>may have knee supports ✓</p> <p>R Knee</p> <p>Clonidine 0.1mg po BID x 30 days</p> <p>noted Poyette R</p>